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Bib Data Sheet

CONFIRMATION NO. 1603

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>09/845,088 | <b>FILING DATE</b><br>04/26/2001<br><b>RULE</b> | <b>CLASS</b><br>709 | <b>GROUP ART UNIT</b><br>2151 | <b>ATTORNEY DOCKET NO.</b><br>5543P003 |
|------------------------------------|---|---------------------|-------------------------------|--|

**APPLICANTS**  
JJ Garcia-Luna-Aceves, San Mateo, CA;  
Bradley R. Smith, Santa Cruz, CA;

**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLN CLAIMS BENEFIT OF 60/200,404 04/28/2000  
AND CLAIMS BENEFIT OF 60/200,401 04/28/2000  
AND CLAIMS BENEFIT OF 60/200,511 04/28/2000  
AND CLAIMS BENEFIT OF 60/200,402 04/28/2000  
AND CLAIMS BENEFIT OF 60/200,403 04/28/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 07/11/2001**

|   |   |                        |                     |                    |                         |
|---|---|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no | 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY<br>CA | SHEETS DRAWING<br>4 | TOTAL CLAIMS<br>21 | INDEPENDENT CLAIMS<br>2 |
|---|---|------------------------|---------------------|--------------------|-------------------------|

Verified and Acknowledged  
Examiner's Signature: *M. R. S. Deligiannis* Initials: *MRB*

**ADDRESS**  
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**TITLE**  
System and method for controlling access to content carried in a caching architecture

|                                   |   |   |
|-----------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>858 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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